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CONFIRMATION NO. 9503

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|-----------------------------|---------------------------------------|--------------|------------------------|--|
| SERIAL NUMBER<br>10/692,299 | FILING DATE<br>10/22/2003<br><br>RULE | CLASS<br>536 | GROUP ART UNIT<br>1644 | ATTORNEY<br>DOCKET NO.<br>11669.0139USC1 |
|-----------------------------|---------------------------------------|--------------|------------------------|--|

## APPLICANTS

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OK, PMA

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CON of 09/886,242 06/20/2001 ABN &  
 which claims benefit of 60/230,978 09/07/2000 ✓  
 and claims benefit of 60/213,637 06/23/2000 ✓  
 and is a CIP of PCT/US00/32678 12/01/2000  
 and is a CIP of PCT/US00/08439 03/30/2000  
 and is a CIP of PCT/US00/04914 02/24/2000  
 and is a CIP of PCT/US00/00219 01/05/2000  
 which claims benefit of 60/145,698 07/26/1999 ✓ PRO 1186  
 and said 09/886,242 06/20/2001  
 is a CIP of PCT/US99/12252 06/02/1999  
 which claims benefit of 60/096,146 08/11/1998  
 and said 09/886,242 06/20/2001  
 is a CIP of 09/709,238 11/08/2000 ABN  
 which is a CON of 09/380,137 ABN  
 which is a 371 of PCT/US99/12252 06/02/1999  
 which claims benefit of 60/096,146 08/11/1998 PRO 1186

OK

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

None, PMA

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 07/20/2004

|   |  |                           |                         |                       |                            |
|---|--|---------------------------|-------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br>35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>Allowance | STATE OR<br>COUNTRY<br>CA | SHEETS<br>DRAWING<br>50 | TOTAL<br>CLAIMS<br>25 | INDEPENDENT<br>CLAIMS<br>1 |
| Verified and<br>Acknowledged                                | Examiner's Signature: <i>[Signature]</i><br>Initials: <i>[Initials]</i>  |                           |                         |                       |                            |

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